



<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/595,075
		Filing Date	June 16, 2000
		First Named Inventor	Ho-Jin Kweon
		Group Art Unit	1745
		Examiner Name	Tracy Mae Dove
Total Number of Pages in This Submission	14	Attorney Docket Number	3364P050

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<div>Declaration of Geun-Bae Kim Return receipt postcard</div>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William E. Hickman, Reg. No. 46,771 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 20, 2002

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Box Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on: <b>December 20, 2002</b>			
Typed or printed name	Nadya Gordon		
Signature		Date	December 20, 2002



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<b>FEE TRANSMITTAL</b> for FY 2003 <i>Patent fees are subject to annual revision.</i>		<b>Complete if Known</b>	
		Application Number	09/595,075
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	June 16, 2000
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Ho-Jin Kweon
		Examiner Name	Tracy Mae Dove
		Group/Art Unit	1745
		Attorney Docket No.	3364P050

<b>METHOD OF PAYMENT (check one)</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																																	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account		<b>3. ADDITIONAL FEES</b>																																																																																																																																																																																																	
Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP																																																																																																																																																																																																			
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account																																																																																																																																																																																																			
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unavoidable</td><td></td></tr><tr><td>1453</td><td>1,280</td><td>2453</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>1,280</td><td>2501</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>1502</td><td>460</td><td>2502</td><td>230</td><td>Design issue fee</td><td></td></tr><tr><td>1503</td><td>620</td><td>2503</td><td>310</td><td>Plant issue fee</td><td></td></tr><tr><td>1460</td><td>130</td><td>2460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>1809</td><td>740</td><td>1809</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr><tr><td>1810</td><td>740</td><td>2810</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr><tr><td>1801</td><td>740</td><td>2801</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="5">Other fee (specify)</td><td></td></tr><tr><td colspan="5">* Reduced by Basic Filing Fee Paid</td><td></td></tr><tr><td colspan="5">SUBTOTAL (3) (\$)</td><td>110.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1051	2051	130	65	Surcharge - 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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	William E. Hickman	Registration No. (Attorney/Agent)	46,771
Signature		Telephone	(310) 207-3800
		Date	12/20/02

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